

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Cheng, *et al.*

Docket No.: TSM02-0971

RECEIVED  
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Serial No.: 10/635,621

Art Unit: 2815

JUN 17 2004

Filed: August 6, 2003

Examiner: Jesse A. Fenty

Title: *Method for Reducing Defects in Post Passivation Interconnect Process*Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

OFFICIAL

ELECTION AND PRELIMINARY AMENDMENT

Dear Sir:

In response to the Restriction Requirement having a mailing date of May 21, 2004,

Applicant hereby elects the species of Group I, the method claims 1-13 and cancels claims 14-21.

In addition, Applicant has added new claims 22-33. Prior to examination on the merits,

Applicant respectfully submits this Preliminary Amendment and remarks as set forth hereinafter.

TSM02-0971

Page 1 of 8

Preliminary Amendment

36/29/2004 JYIMILLA 92532991 591035 12635621

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2004

Application or Docket Number

10/635621

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

6/17/04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 25	Minus ** 21	= 4
Independent	* 4	Minus *** 4	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	\$375
X\$ 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	\$750
X\$18=	
X86=	
+290=	
TOTAL	

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	72
X86=	
+290=	
TOTAL ADDIT. FEE	72

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.